

Wiggin and Dana LLP
One Century Tower
P.O. Box 1832
New Haven, Connecticut
06508-1832

203.498.4400
203.782.2889 fax
www.wiggin.com

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Telefax Transmittal

OFFICIAL

Date:
March 22, 2004

To / Company / Telefax:
Examiner M. Mendoza / U.S. Patent and Trademark Office / 703-872-9306

From:
William A. Simons

Telephone / Email:
203.498.4502 / wsimons@wiggin.com

Client / matter code:
/

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Special Instructions

Applicants: Jonathan Stanley Harold Denyer and Anthony Dyche
Serial No.: 09/781,610
Filed: February 12, 2001
Assignee: Medic-Aid Limited
Art Unit 3761
Examiner: M. Mendoza
Conf. No.: 3833
Docket No.: 102199-101
Title: Improvement in and Relating to Drug Delivery Apparatus

1. Amendment Transmittal Letter - 3 pages
2. Amendment and Reply to Action - 16 pages
3. Charge Deposit Account 23-1665 \$55.00 (and any other deficiencies)

19 page(s) following this page

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Jonathan Stanley Harold Denyer Docket: 102199-101
Anthony Dyche
Serial No.: 09/781,610 Art Unit: 3761
Filed: February 12, 2001 Examiner: M. Mendoza
Assignee: Medic-Aid Limited Conf. No. 3833
Title: IMPROVEMENT IN AND RELATING TO DRUG DELIVERY
APPARATUS

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Certificate of Facsimile Transmission

Date of Transmission: March 22, 2004

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being filed with the United States Patent and Trademark Office via facsimile transmission (703-872-9306) on the date shown above.

Signed: 

Name: William A. Simons

AMENDMENT TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application. The fees have been calculated as shown below:

1. **Small Entity Status**☐ Applicant claims small entity status.

102199-101

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2. Claim Fees

CLAIM AMENDMENT FEE CALCULATION						
	Claims Remaining After Amendment	Minus	Highest Number Previously paid for	No. of extra claims present	Rate	Additional Fee
Total Claims	35	- 20	38	-3	\$18.00	0.00
Independent Claims	7	-3	7	0	\$86.00	0.00
Multiple Dependent Claims (if any)				0	\$290.00	
SUBTOTAL						\$0.00
REDUCTION FOR SMALL ENTITY BY 50%						
TOTAL						\$0.00

☒ No additional claim fees are required.

3. Extension of Time

☒ Applicant requests under the provisions of 37 CFR 1.136 (a) to extend the Period for filing a response in the above-identified application. The requested extension and appropriate non-small-entity fee are as follows:

Requested Extension	Fee	Small-Entity Fee
<input checked="" type="checkbox"/> One month	\$110.00	\$55.00
<input type="checkbox"/> Two months	\$420.00	\$210.00
<input type="checkbox"/> Three months	\$950.00	\$475.00
<input type="checkbox"/> Four months	\$1480.00	\$740.00
<input type="checkbox"/> Five months	\$2010.00	\$1005.00
Extension Fee Total		\$110.00

4. Terminal Disclaimer

☐ A Terminal Disclaimer is attached for which the appropriate fee is:

☐ Non Small-Entity \$110.00

☐ Small Entity \$55.00

5. The following additional items are enclosed:

☐ Small Entity Statement

☐ Other:

6. Payment of Fees

The total of fees due under Sections 1-4, above, is \$110.00.

102199-101

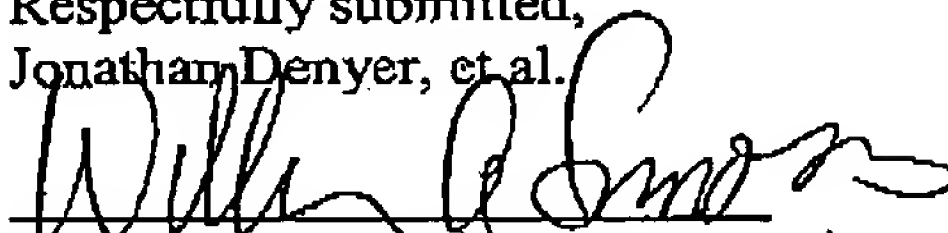
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- ☐ A check in amount of the total of fees due is attached.
- ☒ Please charge \$110.00. to Deposit Account No. 23-1665. Two additional copies of this transmittal are enclosed.
- ☒ Please charge any additional fees or credit overpayment to Deposit Account No. 23-1665.

Date: March 22, 2004
Wiggin and Dana LLP
One Century Tower
New Haven, CT 06508-1832
Telephone: (203) 498-4502
Facsimile: (203) 782-2889

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Respectfully submitted,
Jonathan Denyer, et al.


William A. Simons
Reg. No. 27,096